Combined Declaration For Patent Application and Power of Attorney							ATTORNEY DOCKET 83858CEB		
As below named invento									
My residence, post office address as I believe I am the original, first an below) of the subject matter which	d sole inventor	(if only one name	is list	ted below) or an original,		int inver	ator (if plura	l names	are listed
METHOD OF FORMING FIDUCIAL MARKS ON A MICRO-SIZED ARTICLE									
The specification of which (check c	only one item bel	ow):							
X is attached hereto.									
was filed as United States Application Serial No. on and was amended on (if applicable).									
was filed as PCT international application Number on and was amended on (if applicable).									
I hereby state that I have reviewed	and understand t	he contents of the a	above-	identified specification, in	cluding the	claims, a	is amended b	y any an	nendment
referred to above. I acknowledge the duty to disclose	to the U.S. Pate	nt & Trademark O	ffice a	ll information known to m	e to be mat	erial to p	patentability	as define	d in Title
37. Code of Federal Regulations, §	1.56.								
I hereby claim foreign priority ben certificate, or (365 (a) of any PCT	ients under 11tie international app	35, United States lication(s) which d	Code, lesign	ates at least one country of	her than the	United	States of Am	erica, lis	ted below
and have also identified below any	y foreign applica	tions(s) for patent	or inv	entor's certificate or any F	CT internat	tional ap	plication(s)	designati	ng a least
one country other than the United S	States of Americ	a filed by me on th	e sam	e subject matter having a f	iling date be	efore tha	t of the appl	ication(s)	of which
priority is claimed: PRIOR FOREIGN/PCT APPLIC	CATION(S) ANI	ANY PRIORITY	Y CL	AIMS UNDER 35 U.S.C.	119:				
New York Control		PLICATION NUMBER		DAYE OF FILING			PRIORITY CLAMED U	NDER 35 USC 9	3119
COUNTRY SEE (# PCT, indicate PCT)		- DOMINION NO MAIN		(mnlt/dayyea/)			YES		NO
1 % 5							YES		NO
							YES		NO
- TOWN									
I hereby claim the benefit under Ti	tle 35, United St	ates Code, 119 §(6	e) of a	ny United States provisiona	ıl applicatio	n(s) liste	ed below:		
PRIOR PROVISIONAL APPLIC	CATION(S) AN	D ANY PRIORIT	Y CL	AIMS UNDER 35 U.S.C.	§119 (e):				
PROVISIONAL APP	LICATION NUMBER				FILING DATE (mo	ntfr/day/year)			
7 C T T T T T T T T T T T T T T T T T T									
The confi			<u> </u>						
Hereby claim the benefit under Ti the United States of America that i prior applications(s) in the manne Office all information known to the between the filing date of the prior	is/are listed below r provided by the me to be materia	w and, insofar as the e first paragraph of al to patentability	e subj f Title as def	ject matter of each of the of 35, §112, I acknowledge tined in Title 37, Code of	laims of this the duty to Federal Re	s applica disclose gulation:	tion is not dit to the U.S.	isclosed i Patent &	n that/thos Trademarl
PRIOR US APPLICATIONS OF 35USC§120:	R PCT INTERN	IATIONAL APPL	ICAT	IONS DESIGNATING T	HE U.S FO	R BEN	EFIT UNDE	R	
U.S. APPLICATIONS					STATUS (Check one)				
U.S. APPLICATION NUMBER		U S FILING DATE		PATENT	ED	PENDING	ABA	ANDONED	
PCT	r APPLICATIONS D	ESIGNATING THE U.S	i						
PCT APPLICATION NO PCT FILING		NG DATE U.S. SERIAL NUMBERS ASSIGNED (if any)							
					-				
								-	

Combined Declaration For Patent Application and Power of Attorney (Continued)	ATTORNEY DOCKET 83858CEB
POWER OF ATTORNEY: As a named inventor, I hereby appoint the atto	
agent(s) associated with Eastman Kodak Company Customer No. 01333	3 to prosecute

POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company <u>Customer No. 01333</u> to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

d Corres	pondence to:	Staff	Direct Telephone Calls to: (name and telephone number)	
Patent Legal Staff Eastman Kodak Company 343 State Street Rochester, NY 14650-2201			Clyde E. Bailey, Sr. (585) 722-9349 FAX: (585) 477-4646	
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RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	
FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
Da Bord	Susa H Gerney	Why Coular
DATE	DATE	DATE
December 19,2001	12-19-01	Dec 19, 2001
SIGNATURE OF INVENTOR 204 ()	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
Moran G. Snith		
DATE O	DATE	DATE
19 Dec. 01		